TG: 18506176383 From: 12143052508 Date: 12/04/19 Time: 9:05 AM Page: 01/04



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(((H190003504113)))



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : LEGALINC CORPORATE SERVICES INC.

Account Number : I20180000011

Phone : (844)386-0178 Fax Number : (214)317-4754

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

mail	Address:	

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN CLASSIC VANTAGE SPA & WELLNESS, LLC

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T. LEMEUX

To: 18506176383 From: 12143052508 Date: 12/04/19 Time: 9:05 AM Page: 02/04

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



CLASSIC	VANTAGE SPA & WELLNESS, I	LC.	258 DEC -4 P	∤ ° 9
(Name of the Limit	ed Liability Company as it now sope (A Florida Limited Liability Company)	ars on our records.)	MELANASTE TE	T.ǰ Oid
The Articles of Organization for this Limited L. Florida document number L18000093453	iability Company were filed on	DECEMBER 3RD 2019		
This amendment is submitted to amend the foll	owing:			
A. If amending name, enter the new name o	f the limited liability company l	here:		
The new name must be distinguishable and contain the venter new principal offices address, if applications of the second of the	eable:	designation "LLC" or the		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE				
B. If amending the registered agent and registered agent and/or the new registered o	or registered office address of office address here:	on our records, <u>ente</u>	r the name of the ne	<u> </u>
Name of New Registered Agent:	MERCEDES ZULUETA			
New Registered Office Address:	20640 SW 132ND AVENUE	lorida street address		
		, Florida	33177	
			Zip Code	

New Registered Agent's Signature, if changing Registered Agent:

삸

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or. if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

If Changing Begistered Agent, Signature of New Registered Agent

Page 1 of 3

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If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	EDWARD K. BENNETT	20640 SW 132ND AVENUE	
		MIAMI, FL 33177	■ Remove
			☐ Change
			Aċd
			C Remove
			Change
			Remove
			Change
			D Add
			Remove
			Change
			Remove
			Remove
			☐ Change

Tb: 18506176383 From: 12143052508 Date: 12/04/19 Time: 9:05 AM Page: 04/04

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ocument's e	effective date on the Departm	ent of State	's records.				
	specifies a delayed effe	ctivo data	hut not a	n offective	time at 12:	01 am on i	the earlier of:
The 90th	day after the record is	filed.	e, pachor b	n encouve	enne, de 12.	01 3	
ated	DECEMBER 3RD	_/2	2019				
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	Signat	ure of a mem	iber or authorize	d representativ	c of a member		

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